

Provider Enrollment New Individual/Sole Proprietor Step 2: Add Locations

"Working to protect, preserve and promote the health and safety of the people of Michigan by listening, communicating and educating our providers, in order to effectively resolve issues and enable providers to find solutions within our industry. We are committed to establishing customer trust and value by providing a quality experience the first time, every time."

-Provider Relations

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Provider Enrollment Process Overview

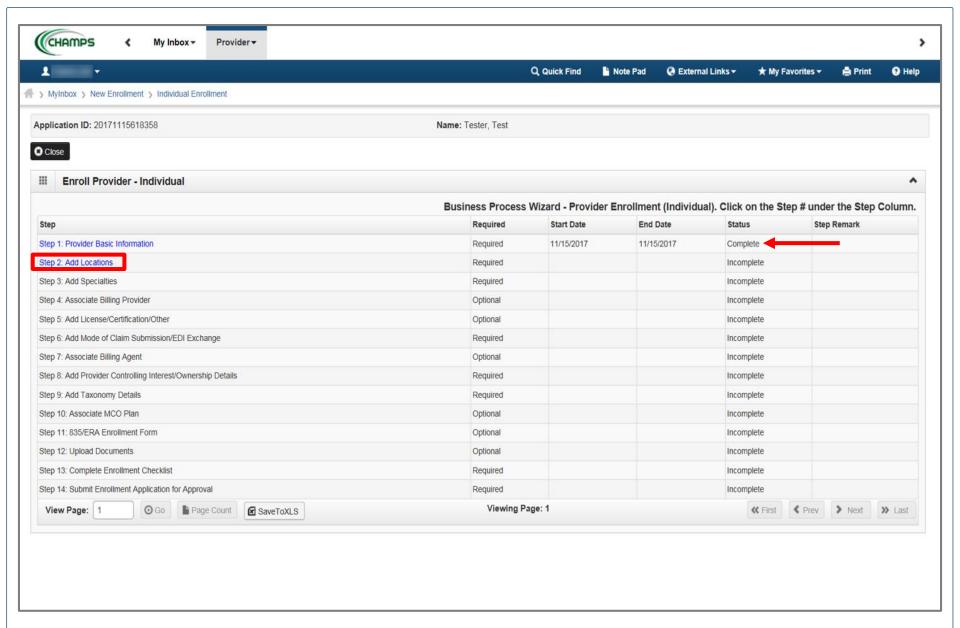
- Step 1: Determine if provider needs to enroll with CHAMPS Michigan Medicaid
 - Policy Bulletin MSA: <u>13-17</u>
 - Policy Bulletin MSA: <u>18-47</u>
 - Policy Bulletin MSA: <u>19-20</u>
- Step 2: <u>Determine CHAMPS Enrollment Type</u>
- Step 3: <u>Enroll with SIGMA Vendor Self Service</u>
 - After completing SIGMA registration allow 3-5 business days to begin and complete the CHAMPS application. If you attempt to enroll in CHAMPS during this time you may get an error when validating your information.
- Step 4: Register for a MILogin Account for Access to CHAMPS
- Providers wishing to elect another person to have Domain Administrator rights are required to submit:
 - Form: Electronic Signature Agreement Cover Sheet (MDHHS-5405)
 - Form: Electronic Signature Agreement (<u>DCH-1401</u>)



Starting a New Provider Enrollment Application

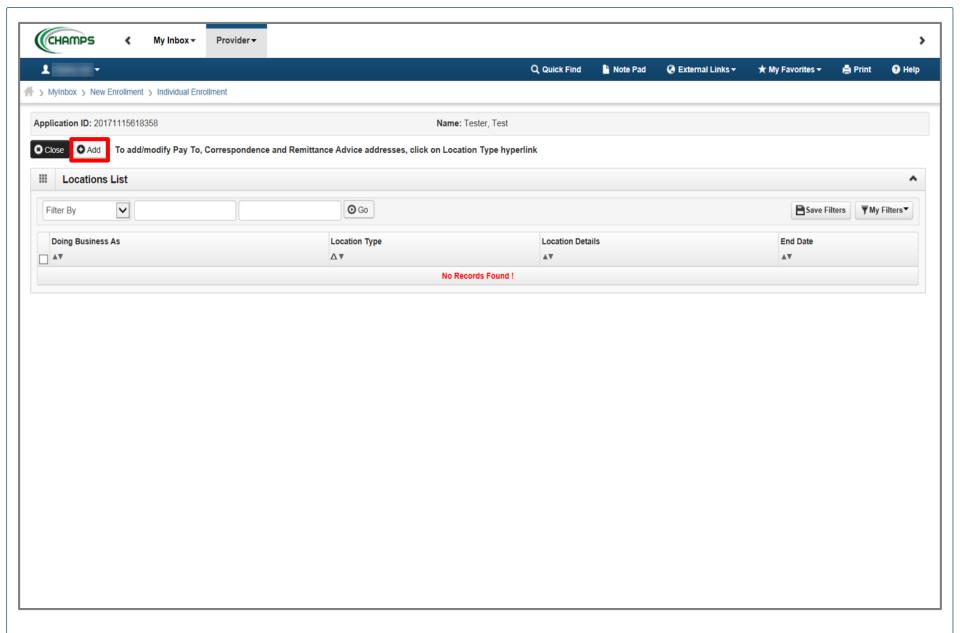
Details to Step 2: Add Locations

Track Application - PDF, Recording



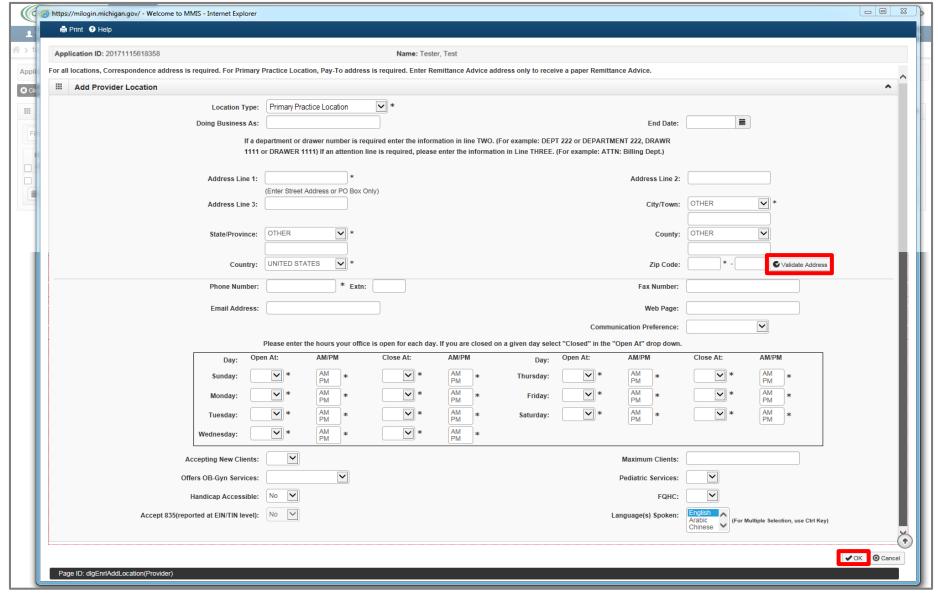
- Individual Provider Enrollment steps are listed (Please Note: some steps are required versus optional)
- Step 1 has a status of Complete
- Click on Step 2: Add Locations





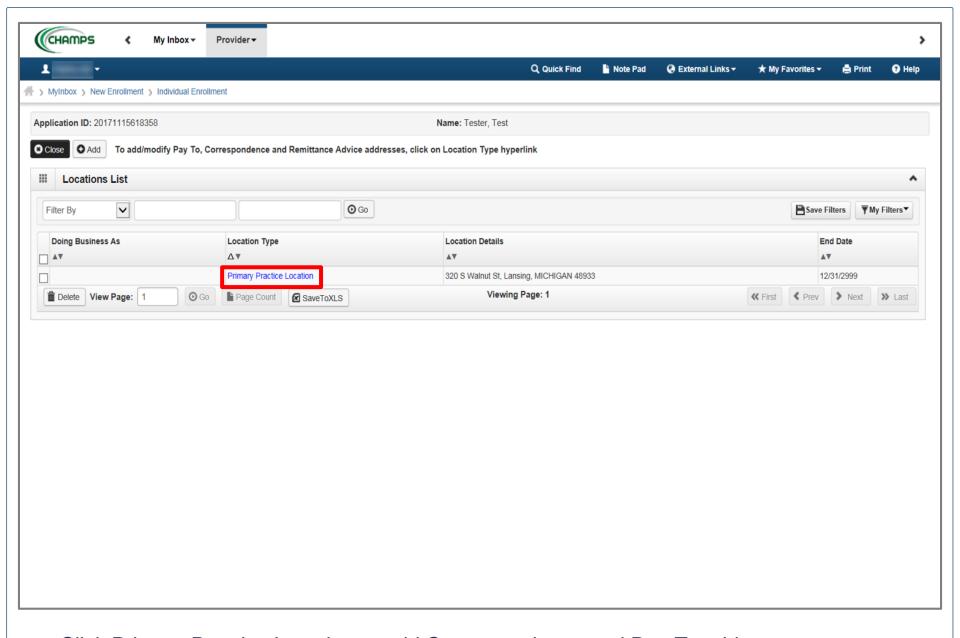
Click Add, to enter Primary Location information



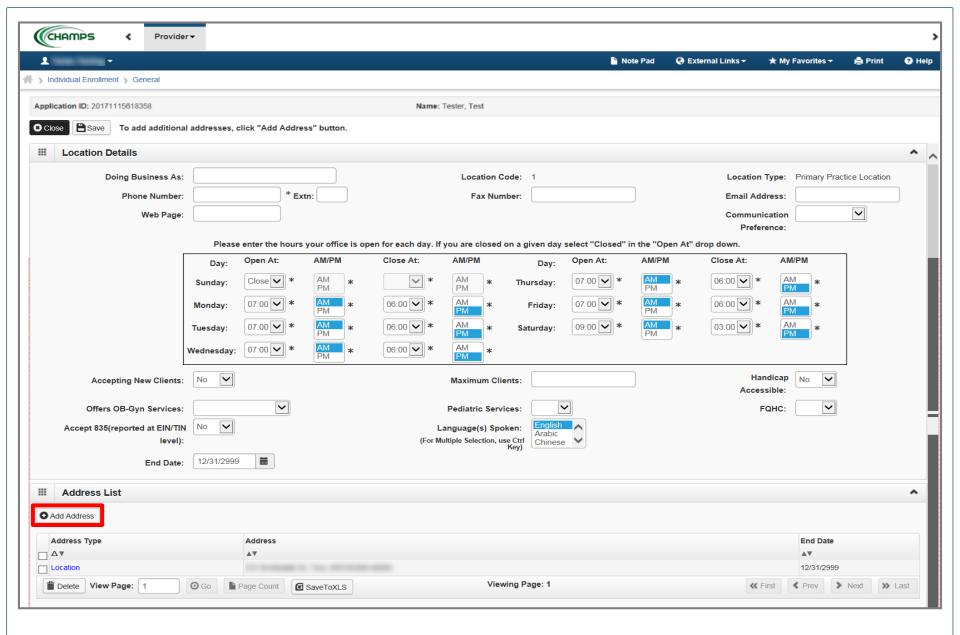


- Complete Address Line 1 and Zip Code, click Validate Address
 - (Please Note: you should receive confirmation "Address Validation Successful")
- Complete all other fields marked with an asterisk (*)
- Click Ok



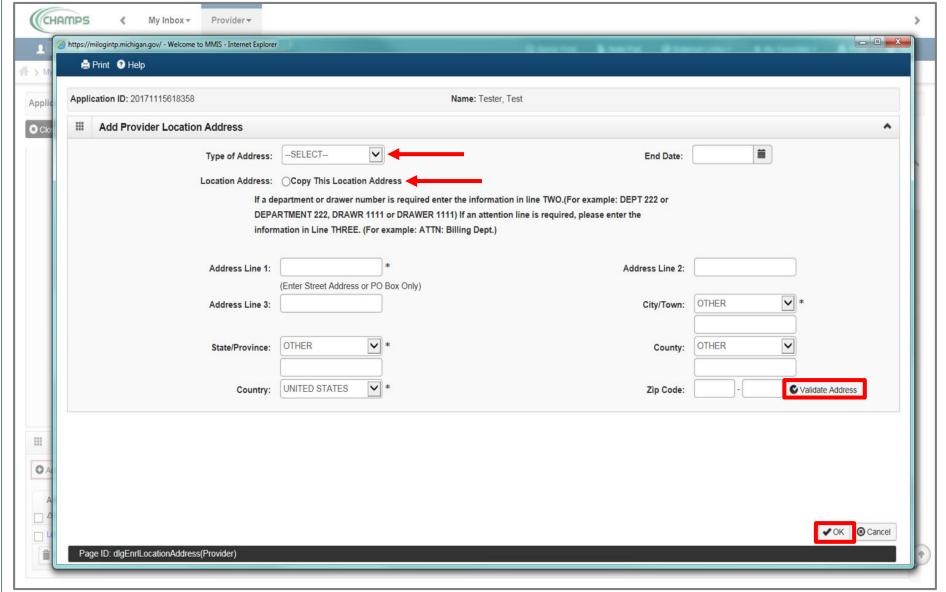


Click Primary Practice Location to add Correspondence and Pay-To address
 (Please Note: Correspondence and Pay To address are required for all locations. Optionally enter a Remittance Advice address to receive a paper Remittance Advice)



Click Add Address



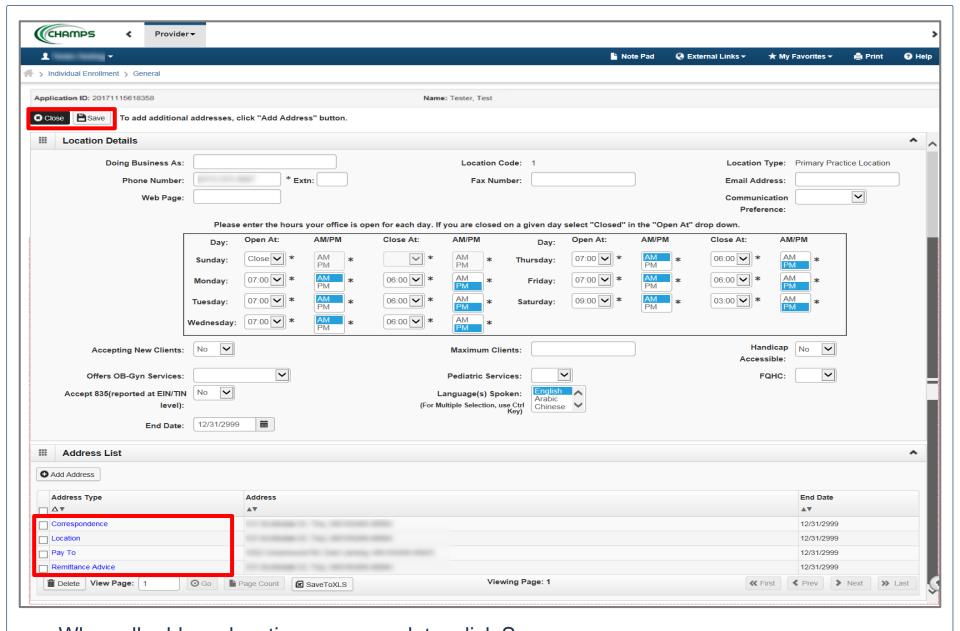


- From the drop-down list, select Type of Address
- Complete all fields marked with an asterisk (*)
- Click Validate Address

(Please Note: you should receive confirmation "Address Validation Successful")

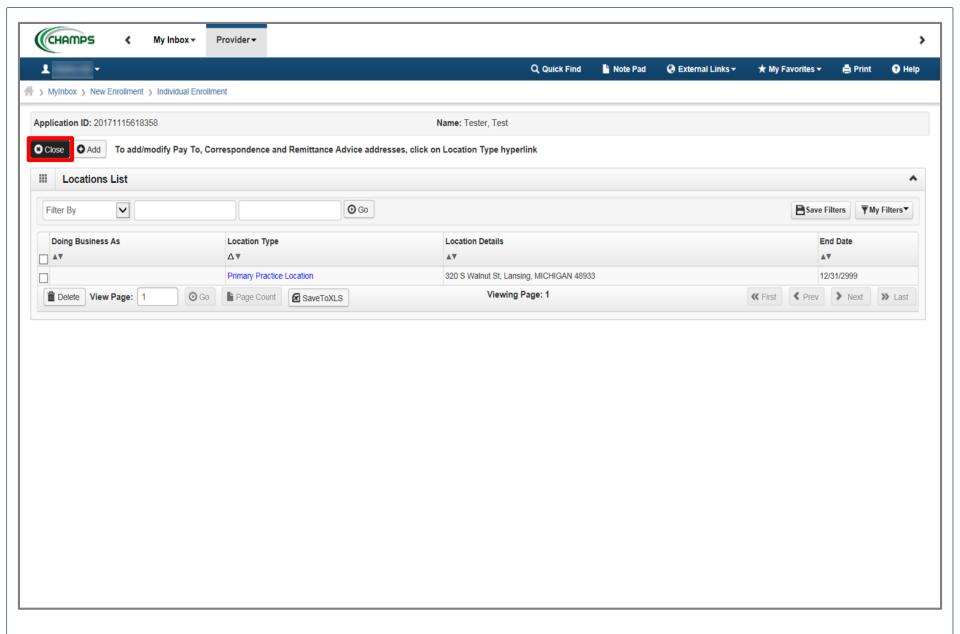
Click Ok





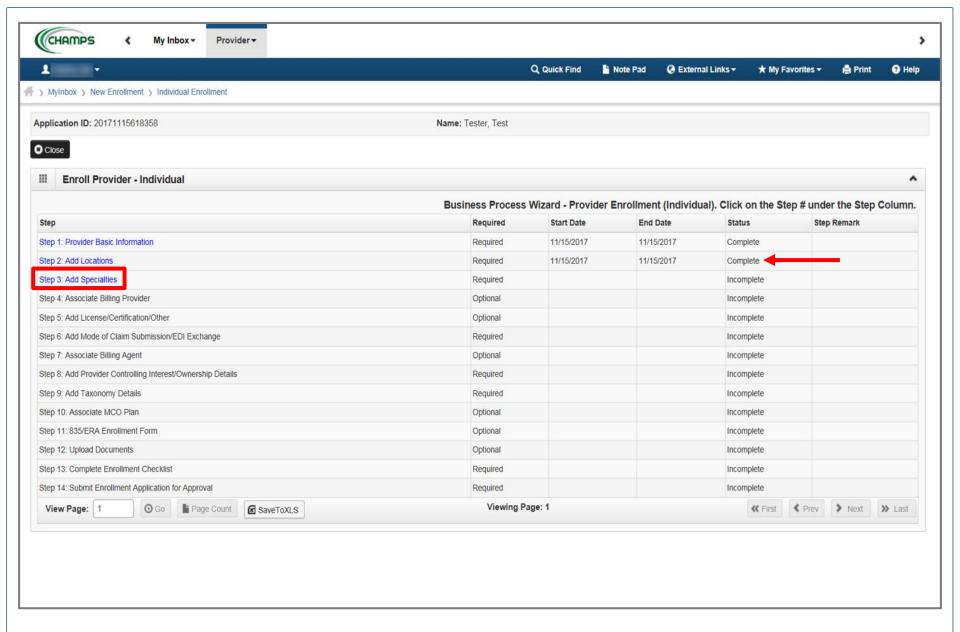
When all address locations are complete, click Save
 (Please Note: If the address is the same you can click on the radio button that says, Copy This Location Address; example on previous slide.)

Click Close



Click Close





- Step 2 is complete
- Click on Step 3: Add Specialties



Provider Enrollment Resources

• **Provider Enrollment website:** http://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_42542_42543_42546_85441---,00.html

Trainings:

- MILogin
- CHAMPS Enrollment Application: Individual/Sole Proprietor User Guide
- Domain Administrator Functions
- Track Application PDF, Recording
- Step 1: Provider Basic Information PDF, Recording

• Forms:

- Electronic Signature Agreement Cover Sheet (MDHHS-5405)
- Electronic Signature Agreement (<u>DCH-1401</u>)

SIGMA:

- New Individual/Sole Proprietor Providers must register with SIGMA as Vendors
- Please visit: <u>Michigan.gov/SIGMAVSS</u>

Provider Enrollment:

- (800) 292-2550
- ProviderEnrollment@Michigan.gov
- <u>ProviderSupport@Michigan.gov</u>

